

## **CERTIFICATE OF MAILING UNDER 37 C.F.R. §1.8(a)**

**Applicant:** 

Coelho, Philip H.

Serial No.:

09/709,237

Filed:

November 10, 2000

For:

Apparatus and Method of Preparation of Stable, Long Term Thrombin From Plasma and Thrombin Formed Thereby

Paper:

1. Amendment (responsive to the Office Action dated June 10, 2003);

- 2. An Extension of Time (original and one copy);
- 3. An Amendment Transmittal (original and one copy);
- 4. A check in the amount of \$647.00; and
- 5. A Return Receipt Card.

I hereby certify that the above identified correspondence, which is attached, is being deposited with the United States Postal Service as first class mail in an envelope addressed to:

Mail Stop AF Commissioner for Patents Post Office Box 1450 Alexandria, VA 22313-1450 on December 10, 2003

Heidi Hernandez

December 10, 2003

(Signature)

(Date of Signature)

DE 15 2000 ST

TTORNEY'S DOCKET NO. BK/30195-pa

In re the application of:

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Sir:

Transmitted herewith is an amendment in the above-identified application.

No additional fee is required.

The fee has been calculated as shown below:

Other Than A

	(Col_1)		(Col 2)	(Col 3)Sma	all Entity: Small		Entity:	
	Claims Remaining After Amendment		Highest No. Previously Paid For	Present Extra	Rate	Addit. Fee	Rate OR	Addit. Fee
Total:	*18	Minus	**20	0	x 9.=	0.	x 18.=	0.
Indep.:	*9	Minus	**5	4	x 43.=	172.	x 86.=	0.
Total:								\$172.

<sup>\*</sup> If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

\*\* If the "Highest Number Previously Paid For" in this space is less than 20, write "20" in this space.

\*\*\*If the "Highest Number Previously Paid For" in this space is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total of Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

A check in the amount of \$647.00 is enclosed, \$172.00 of which is to cover the filing fee for the presentation of additional claims and \$475.00 of which is to be received as the extension of time fee.

The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 11-1734. A Duplicate copy of this sheet is enclosed.

XXX Any additional filing fees required under 37 CFR 1.16 for the presentation of extra claims.

\_\_ Any patent application processing fees under 37 CFR 1.17/

Dated: December 10, 2003

BERNHARD KRETEN, Reg. No. 27,037